LOS ANGELES COUNTY COMMISSION ON HIV HEALTH SERVICES

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While not required of meeting participants, signing-in constitutes public notice of attendance. Presence at meetings is recorded solely based on sign-in sheets, and not signing-in constitutes absence for Committee members.

Only members of the Commission on HIV Health Services are accorded voting privileges, thus Commissioners who have not signed in cannot vote.

COMMISSION MEETING MINUTES June 10, 2004

MEMBERS PRESENT	MEMBERS ABSENT	OTHERS PRESENT	OAPP STAFF
Al Ballesteros, Co-Chair	Adrian Aguilar	Cinderella Barrios-Cernik	S. Bilde
Nettie DeAugustine, Co-Chair	Ruth Davis	Robert Blue	Patricia Gibson
Ruben Acosta	Nancy Eugenio	Tony Braswell	Michael Green
Jayne Adams	Alexander Gonzales	Donna Brown	Raymond Johnson
Carla Bailey	Michael Lewis	Gordon Bunch	Ijeoma Nwachuku
Carrie Broadus	Mark Parra	Genevieve Clavreul	Rene Seidel
Robert Butler	Dana Pierce-Hedge	Alex Garcia	Diana Vasquez
Charles Carter	Alexis Rivera	Davyd McCoy	Juhua Wu
Richard Eastman	Fontaine Shockley	Denine Peare	
Whitney Engeran		Rick Platt	COMMISSION STAFF
Gunther Freehill		Tina Quatro	Jane Nachazel
William Fuentes		John Rowe	James Stewart
David Giugni		Natalie Sanchez	Craig Vincent-Jones
John Griggs		Maribel Ulloa	Nicole Werner
Michael Gray		Gary Vrooman	
Charles Henry		Jan Wise	
Rebecca Johnson-Heath		Patricia Woody	
Wilbert Jordan		Rocio Yong	
Marcy Kaplan			
Brad Land/Dean Page			
Anna Long			
Andrew Ma			
Elizabeth Marte			
Dan Mejia			
Edric Mendia			
Vicky Ortega			
John Palomo			
Chris Perry			
Wendy Schwartz			
Paul Scott/Richard Hamilton			
Vanessa Talamantes			
Kevin Van Vreede			
Kathy Watt			
Fariba Younai			

- I. CALL TO ORDER: Ms. DeAugustine called the meeting to order at 9:45 a.m. Self-introductions were made.
- II. APPROVAL OF AGENDA: The agenda was approved. MOTION #1: Passed by Consensus.
- III. APPROVAL OF MEETING MINUTES: The May 13, 2004 meeting minutes were approved. MOTION #2: Passed by Consensus.

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- IV. PARLIAMENTARY TRAINING: Mr. Stewart had no comments
- V. **PUBLIC COMMENT**: There were no comments.

VI. STANDING COMMITTEE REPORTS

A. Priorities and Planning (P&P) Committee:

- 1. **Proposed Phase II Allocation Contingency:** Mr. Land explained that an expedited process was conducted in conjunction with the Finance Committee to develop Phase II revised allocations.
 - Approximately \$1.6M of the award reduction was accounted for in Phase I.
 - Revenue enhancement strategies have to date resulted in: a reduction in the ADPA cut from \$500K to \$360K; a \$300K increase in Title II funding; some Therapeutic Monitoring vouchers provided.
 - Phase II allocation reductions were determined based on primarily low priority and/or availability of other funding streams. Phase II recommendations: Hospice, \$166,000 (category defunded); Substance Abuse, \$166,000 (about \$0.5%); Medical Outpatient, \$1.2 million (remainder of needed reduction).
 - Mr. Henry reported that an increase of \$4 million for Therapeutic Monitoring was being proposed in State committee, but approval was not assured. He continued that cuts would need to be enacted July 1st in order to avert deeper cuts later. Mr. Freehill said the budget was likely to be passed at or near the end of June, and that would assist planning.
 - Mr. Scott expressed concern about Hospice cuts. Mr. Henry noted that Hospice was now mostly funded by Medi-Cal, along with NCC funds. The Mercer Rate Study also showed lowered usage.
 - Mr. Engeran said P&P did good work and noted there were different Residential sub-categories with this
 particular sub-category reporting low usage. Ms. Broadus added that housing for the chronically ill often
 showed better outcomes.
 - Ms. Watt asked about the ADPA cut, adding that ADPA has also cut its funding to providers. Ms. DeAugustine said dialogue with ADPA was continuing. Ms. Watt offered to participate in the dialogue.
 - Mr. Acosta asked how enhancement strategy funds were distributed. Ms. Gibson said the budget must
 match the HRSA award so that funding cuts to contracts would remain even if other revenues are restored.
 Mr. Henry elaborated that enhancement strategy funds stretch NCC funds so contracts need not be cut so
 deeply.
 - Mr. Stewart reported that stricter disclosure laws require Commissioners to disclose their affiliation with potentially affected providers while continuing to allow those Commissioners to vote. Commissioners disclosing affiliation were: Mr. Acosta, Ms. Broadus, Ms. DeAugustine, Mr. Engeran, Dr. Jordan, Ms. Talamantes and Ms. Watt.

MOTION #3: Passed by Roll Call Vote.

2. **HIPAA On-Line Training:** Mr. Land said the training was important for Commissioners as increasing data collection would be used to enhance needs assessment activities. P&P recommended the basic training module be mandatory. It was agreed to refer the matter to Recruitment, Diversity and Training (RD&B). **MOTION #4: Referred to RD&B.**

B. Recruitment, Diversity and Bylaws (RD&B) Committee:

- 1. *Nomination: Anthony Stately, Alternate:* Mr. Butler noted RD&B was bringing forward the Stately nomination—despite the Ordinance Sunset Review restructuring—because Mr. Parra had requested an alternate. **MOTION #5:** *Passed by Consensus*.
- 2. *Ordinance Sunset Review:* Mr. Butler called attention to the letter to the Board of Supervisors from the Chief Administrative Office (CAO) reporting on the proposed membership structure.
 - Ms. Watt asked about the PPC seat. Mr. Engeran noted there is one non-voting seat in the matrix. In addition, Motion 3a of May 13, 2004 memorialized the requirement that one of the 39 voting seats be filled by a member in good standing on the PPC.
 - Ms. Talamantes asked about PPC members on the Executive Committee. Mr. Vincent-Jones replied that Committees are based on the Ordinance and Bylaws, so that would be developed after the new Ordinance is approved.
- 3. *Transition Plan:* If the Board accepts the recommendation, the Commission will begin to revise the Ordinance on July 1, 2004, but the transition plan comprises extension of the current membership until January 1, 2005.

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• Ms. Broadus wanted confirmation that the new membership information would be sent to all different types of provider/consumer groups. Mr. Vincent-Jones replied that was the intent, and the line referring to them in the transition plan had been left off inadvertently.

MOTION #6: Passed by Roll Call Vote.

- 4. **Revised Commission Application:** Mr. Butler introduced a revised Commissioner application in order to begin preparing for the new membership once the new Ordinance has been approved.
 - Mr. Land asked if the application boxes expand. Mr. Vincent-Jones said they had been designed not to in order to limit the length of answers.
 - Dr. Jordan felt the application was too long and would discourage clients from applying. Mr. Vincent-Jones noted the application is actually shorter than the current one. In addition, staff assistance is offered and assistance from nominating bodies will also be available. Mr. Vincent-Jones added that demographic information is required by HRSA.
 - Ms. Broadus suggested a feedback process between the Commission and the community. Mr. Vincent-Jones said that each seat was linked to nominating bodies to which Commissioners would be responsible.
 - Ms. Adams noted the application recognizes those from a special population, but not those experienced in working with a special population without being a member of it.
 - Mr. Henry suggested the application be held one month for public comment. Mr. Vincent-Jones said, while that could be done, it would delay the timeline the Commission had just approved.
 - Ms. Talamantes recommended changing population listings to match the PPC BRGs.
 - Mr. Fuentes asked about a Spanish version. Mr. Vincent-Jones said a translation would be done.
 - Mr. Acosta asked what would happen if an unaffiliated consumer took a position which changed his or her
 unaffiliated status. Mr. Vincent-Jones said an earlier recommendation that the Commission approved for
 the new Ordinance provides that a person no longer representing the seat to which s/he was appointed can
 be removed.
 - Agreed that the Commissioners and public would have until June 22, 2004 to submit written comment about the application.

MOTION #7: Amended motion passed by Consensus.

5. Report on Consumer Training: Postponed, and the presentation was included in the packet.

C. Joint Public Policy (JPP) Committee

- 1. **Response to Title I Cuts:** Mr. Engeran noted discussions with ADPA are focussing on areas of collaboration and duplicative efforts.
 - Mr. Freehill said the ADPA funds are not strictly counseling and testing funds, but there is a set-aside. He was not sure of guidance for the set-aside, though funds were usually used for HIV counseling and testing.
 - Mr. Henry said the record should reflect that there is a question as to whether or not the guidance restricts any funds to HIV Counseling and Testing. The set-aside is 5% to 20%, varying by area. Mr. Vincent-Jones agreed to get further clarification from ADPA.
- 2. **Response to HRSA's Response:** Mr. Engeran called attention to the lack of responsiveness in the letter from Dr. Duke responding to the Commission's request for information on the Title I award. Consequently, a request has been initiated under the Freedom Of Information Act (FOIA).
 - Dr. Jordan voiced concern that the Commission had not seen the request before it was sent and asked if California's U.S. Senators had been included in the request. Ms. DeAugustine noted Senators Boxer and Feinstein had been included in the dialogue, and that responses around this issue had been delegated to the Co-Chairs and the JPP Committee.
 - It was noted the information is not likely to be of help for the Year 14 award already made, but will assist in developing the application for Year 15.
- 3. *Municipal Communication Strategy:* Mr. Engeran said the process had been fruitful:
 - Several additional communities had adopted proclamations in support of HIV/AIDS funding, including Monterey Park and Signal Hill.
 - Mr. Engeran said there were good lessons learned to improve the process and a database had been developed for future needs.
- 4. *Community Forum Request:* Mr. Engeran reported that JPP is trying to convene a community forum on the adult film industry and bathhouse regulation issues.
 - Mr. Engeran said Dr. Fielding's participation has been requested verbally with a memorandum follow-up.

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D. Finance Committee

- 1. Assessment of Administrative Mechanism: Ms. Bailey said the Committee had selected Haupert and Associates to perform the Year 14 Assessment of the Administrative Mechanism. She emphasized that they had carefully considered potential conflict of interest issues.
 - Mr. Henry expressed concern that both the contractor and subcontractor had been paid in the past through the Administrative Mechanism, and had also participated in process that were included in the Scope of Work.
 - Mr. Vincent-Jones said he had consulted with both HRSA and County Counsel about the conflict of interest concern. They both agreed there was no technical conflict. He recommended that RD&B begin looking at conflict-of-interest, both perceived and actual, policies and procedures, but noted that in the absence of such policies and procedures, the Commission was really not in the place to make any additional determinations.
 - Mr. Ma noted that virtually every potential contractor for the assessment has some invoice experience so to disqualify on that basis would have eliminated the qualified contractor pool.

E. Standards of Care (SOC) Committee

- Dr. Jordan said the Committee met but again lacked a quorum.
- Ms. DeAugustine said she, Mr. Ballesteros and Mr. Vincent-Jones had met to revise committee assignments to improve attendance. She added it was very important for Commissioners to attend their committees.

VIII. STATE OFFICE OF AIDS (OA) REPORT: There was no report.

IX. CO-CHAIR'S REPORT:

A. <u>Commission Name Change</u>: Ms. DeAugustine presented a recommendation to shorten the Commission's name to "Commission on HIV" to better distinguish it from the Department of Health Services, to encompass a broader scope of work, and because it is a simpler title.

MOTION #8: Passed by Consensus.

- B. <u>Follow-up with DHS Leadership</u>: Ms. DeAugustine reported she and Mr. Ballesteros met with Drs. Garthwaite, Schunhoff and Fielding on the Department's decision to backfill Title I allocation cuts to Medical Outpatient with NCC funds. Mr. Henry attended the first half of the meeting by phone and Ms. Gibson was there the entire time.
 - Mr. Ballesteros said Dr. Fielding emphasized the Department's right to allocate NCC funds as it thought best, but agreed to improve communication without specifying a process.
 - DHS acknowledged no additional data was used in making its decision. Ms. Watt said if DHS wished to support Medical Outpatient, they should assist in obtaining data.
 - Mr. Engeran applauded the meeting, but said Maintenance Of Effort (MOE) funds do pertain to the Commission's charge if not by the letter of the law, certainly by the spirit of it. He suggested the matter be referred to the Supervisors.
 - Mr. Henry said DHS does now better understand the Commission's charge to plan across funding sources. He added DHS specified the funding only for Phase I; a decision on Phase II has not yet been made.
 - Ms. Watt asked Dr. Long about her process of communication with DHS. She said she provides reports but is not always informed about what happens with the information.
 - Mr. Freehill said it was a similar problem to that with ADPA. Ms. DeAugustine disagreed, noting that the difference is that DHS is one of the key partners.
 - It was agreed that JPP would track the situation and report to the Executive Committee.
- C. **PPC Joint Activities**: Discussion deferred to PPC Report.

X. PREVENTION PLANNING COMMITTEE (PPC) REPORT

- A. <u>PPC Vote to Separate from Commission</u>: Ms. Talamantes reported that at the June 3, 2004 PPC meeting, the body voted to separate from the Commission and report directly to DHS. With that in mind, references to the PPC should be removed from the Ordinance.
 - Ms. Talamantes emphasized that the PPC wanted to continue and to improve communication with the Commission.
 - Mr. Henry said the original concept was to account for both the needs of HRSA and CDC, but the guidances now vary in key points like the CDC requirement for a voting governmental co-chair. The differences are

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emphasized by the Commission separation from DHS, and given that the CDC mandate is for a joint community and Health Services mandate.

- Dr. Long noted that only the Board can change the Ordinance. Mr. Vincent-Jones said recommendations from the Commission on the Ordinance have been forwarded to DHS and County Counsel. Any additional recommendations would need to be bundled with those that have already been forwarded.
- Mr. Engeran said he found the motion acceptable, but was concerned that, after so much discussion, there could be a perception that would harm the development of coordinated care and prevention.
- Mr. Henry noted there are other integration issues apart from communication, like different laboratory forms, and added that County Counsel had said only Board appointees can vote on the JPP Committee.
- It was suggested a communication structure that would accommodate CDC guidelines could be developed. Mr. Stewart said that subject would violate Brown Act guidelines as being too far from the agenda. He added, however, that the By-Laws are the appropriate format for work processes. The Ordinance was only for the body's structure.

MOTION #9: Passed by Roll Call Vote.

CDC had made its provider award and they represent, in the aggregate, a reduction to the jurisdiction. Ms. Watt noted AIDS numbers are lower here than in the South and East. It was agreed to add the reduction of the total awards, and the reduced diversity of services to the JPP agenda.

XI. DIRECTOR'S REPORT:

- A. <u>Administrative Procedures</u>: Mr. Vincent-Jones said once the Commission's website was running, packet materials would be uploaded the Monday before the meeting. That will require materials to be received by the office on the Friday prior to the meeting.
- B. "Maintaining EMA Relations" Training: Emily Gantz McKay will conduct the training again on July 29th, 10:00 a.m. to 12:00 noon. on the 8th Floor of Metroplex Wilshire. Ms. McKay, he noted, is a nationally renowned technical assistance provider and contractor who is very familiar with HRSA, Title I and Ryan White CARE Act issues. She conducts this training across the country.
- C. <u>Staffing Progress</u>: Mr. Vincent-Jones said the new Commission Secretary would start work on June 14th. The three managerial positions and the Senior Secretary III items were now open.

XII. HIV EPIDEMIOLOGY REPORT: Gordon Bunch reported.

- Two years after the start of HIV reporting, there are still over 12,000 reports (about half) to do.
- The State, with County participation, is reviewing the process.
- It takes twice as long to complete an HIV report as an AIDS report because of inconsistencies that must be reconciled between the labs and providers.
- Forty percent (40%) of the reporting staff that follows up on the reports will be lost in September.
- If the State decides to change to a names reporting system, it will take a year to redo the HIV reports already done.
- There was a plan to do an evaluation of code-based reporting that would meet CDC requirements, but the State has discontinued it.
- The County has agreed to comply with State regulations, along with San Diego and San Francisco, to submit AIDS cases by names—a practice in which the three counties had not previously participated.
- Mr. Henry noted that in January 2005, the State would run the numbers for the July 2005 allocations. The County could lose funds, because, while the County carries one-third of the disease burden of disease, it is not currently reflected in the numbers.

XIII. OAPP REPORT

A. Invoice Adjustments:

- Providers will now receive detail on how and why invoice adjustments are made.
- Forms used in the process were presented in the packet.
- This improvement was in response to one of the recommendations from the Assessment of the Administrative Mechanism.

A. Implementation of Phase I Year 14 Cuts:

- A memorandum detailing the cuts was presented by Mr. Henry.
- Various contracts would be cut different amounts due to considerations of GEN and other factors. Mr. Henry said no contract would be cut more than 15% in order to reach the 3% overall figure.

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- Mr. Henry noted that agencies funding a program through more than one funding stream might see an overall higher cut if, for example, both Title I and NCC funds were cut.
- He said Phase II cuts would not necessarily be needed if all the Therapeutic Monitoring funds and Prevention funds being considered for restoration are received.

XIII. COMMISSIONER COMMENT:

- Mr. Eastman called attention to the progress of the medical marijauna petition.
- XIV. **ANNOUNCEMENTS**: There were no announcements
- XIV. **ADJOURNMENT**: The meeting was adjourned in memory Fr. John Santillan. He was memorialized by Richard Zaldivar and a letter honoring him was included in the packet. The meeting was also adjourned in memory of Kenneth Dannell, who was remembered by Mr. Engeran. Mr. Dannell was a former Board Member of Being Alive Long Beach. The meeting adjourned at 2:00 p.m.

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	TION AND VOTING SUMMARY	
MOTION #1: Approve the Agenda.	Passed by Consensus	Motion Passes
MOTION #2: Approve minutes of the May 13, 2004 meeting.	Passed by Consensus	Motion Passes
MOTION #3: Approve the strategy for Year 14 Title I Phase II reductions as a contingency plan if none or only partial Year 14 revenue enhancement strategies are not successful, as presented.	Ayes: Acosta, Adams, Bailey, Ballesteros, Broadus, Butler, Carter, DeAugustine, Eastman, Engeran, Fuentes, Giugni, Gray, Griggs, Johnson-Heath, Jordan, Kaplan, Land, Long, Ma, Marte, Mejia, Mendia, Palomo, Schwartz, Talamantes, Van Vreede, Watt, Younai Opposed: Scott Abstentions: none	Motion Passes Ayes: 29 Opposed: 1 Abstentions: 0
MOTION #4: Approve new requirement that all Commission members must take Health Insurance Portability and Accountability Act (HIPAA) on-line training.	Referred to RD&B.	Referred to RD&B.
MOTION #5: Nominate Anthony Stately as Alternate to the Native American HIV+ seat, and forward the nomination to the Board of Supervisors.	Passed by Consensus	Motion Passes
MOTION #6: Adopt the proposed plan for transitioning the Commission into membership compliance with the new Ordinance, as presented.	Ayes: Acosta, Adams, Bailey, Ballesteros, Broadus, Butler, Carter, DeAugustine, Engeran, Fuentes, Griggs, Jordan, Kaplan, Land, Long, Ma, Marte, Mejia, Mendia, Palomo, Schwartz,,Scott, Talamantes, Van Vreede, Watt, Younai Opposed: Eastman, Giugni Abstentions: Gray, Johnson-Heath	Motion Passes Ayes: 26 Opposed: 2 Abstentions: 2
MOTION #7: Open the revised Commission membership application for written public comment until June 22, 2004, then refer to the RD&B for review and return to the Commission in July.	Passed by Consensus	Motion Passes
MOTION #8: Endorse a Commission name change from "Commission on HIV Health Services" to "Commission on HIV" and include in the set of Ordinance Change recommendations to be forwarded to the Board of Supervisors.	Passed by Consensus	Motion Passes
MOTION #9: Remove references of Select Committee on Prevention Planning from Ordinance 3.29, as recommended by PPC.	Ayes: Acosta, Bailey, Ballesteros, Carter, DeAugustine, Fuentes, Giugni, Johnson-Heath, Long, Mendia, Ortega, Perry, Scott, Talamantes, Van Vreede, Watt Opposed: Broadus, Butler, Eastman, Engeran, Land, Marte, Palomo Abstentions: none	Motion Passes Ayes: 16 Opposed: 7 Abstentions: 0